EMPLOYEE IDENTIFICATION STATEMENT			See Paperwork/Privacy Act Notice on Reverse.	
1.	Is the Social Security number on the letter the same as on your records?		☐ YES	□ NO
	If "No," what do your records show?			
2.	ULL NAME OF EMPLOYEE			
3.	(a) DATE OF BIRTH	(b) PLACE OF BIRTH		
4.	(a) FATHER'S NAME	(b) MOTHER'S NAME		
5.	AST KNOWN ADDRESS OF EMPLOYEE			
6.	(a) PHYSICAL DESCRIPTION (If available)			
	(b) DISTINGUISHING CHARACTERISTICS			
7.	(a) NAME AND ADDRESS OF PREVIOUS EMPLOYER		(b) DATES OF EMPLOYMENT (If available)  FROM TO	
			FROM	10
8.	NAME AND ADDRESS OF NEXT OF KIN			
9.	Dates of employment with your company		FROM	то
10.	10. FOR SIGNATURE COMPARISON, PLEASE SEND A PHOTOCOPY OF THE INDIVIDUAL'S FORM W-4, IF AVAI			
	SIGNATURE (First name, middle initial, last name) (Write in ink)		DATE (Month, day, year)	
	SIGN HERE	TELEPHONE NUMBER (Include Area Code)		
	PRINT NAME		TITLE	